

NEONATOLOGY Notes

ROUTINE DELIVERY ROOM CARE

1. **Position:** Place infant head downward immediately, to clear mouth, pharynx & nose of secretions
2. **Suction:** Gently suction nose and pharynx with bulb syringe or soft catheter, while stimulating to cry
 - a. Non-high risk infant: head down
 - b. High risk (e.g. CS delivery): crib level

3. Assess APGAR score

Sign	0	1	2
A	Blue, pale extremities & trunk	Blue extremities Pink trunk	Completely pink
P	Absent	Below 100	Above 100
G	No response	Grimace	Cry, cough, sneeze
A	Limp	Some flexion of extremities	Active motor
R	Absent	Slow, irregular	Good strong cry

Score:

7-10 at 1 min = vigorous infant

4-6 = mild-moderate asphyxia → 100% O₂ by face mask

0-3 = severe asphyxia → intubation

One-minute score: gives index of necessity for resuscitation

Five-minute score: more valuable in predicting mortality, success of resuscitation and neurologic deficit at 1 year of age

Resuscitation of the depressed infant

Score 4-6

- Vigorous stimulation and suctioning of secretions
- Assisted ventilation for the depressed baby may produce spontaneous respiration
- If still unresponsive, tracheal intubation and positive pressure

Score 0-3

- Vigorous stimulation and suctioning of secretions
- Immediate intubation and O₂ inhalation
- Correction of acidosis

4. Maintain body heat

- a. Body surface of NB thrice that of adult
- b. Rate of heat loss 4x that of adult occurring by:
 - i. Convection to cooler air
 - ii. Conduction to cooler materials